

South Central TSE Committee

Draft TSE Region 4 Meeting Minutes 4/1/2015

Meeting Information	Date	4/1/2015	Time	1400-1600	Location	SLWR
	Project	TSE Monthly Meeting				
	Meeting Leader	Kevin Kraal, MD				
	Meeting Facilitator	Brandy Bartholomew	Scribe	Lara Mclean		
TOPIC		DISCUSSION/RECOMMENDATIONS				ACTION ITEMS/ ASSIGNMENTS
Meeting Minutes		Meeting was opened by Kevin Kraal, MD. Minutes from 3/4/2015 approved.				Meeting minutes approved by all.
Review of Bylaws		It was noted that we needed a voting member list to establish a quorum. Please see table at the bottom. This is the list as it stood on this day- Tom Mortimer moved that these amended guidelines be accepted and Brandy Bartholomew seconded, and the motion passed.				See attached list and update as meetings progress.
TSE State Level Update		Discuss Resources; Last order of business discussed at the state meeting is to establish criteria for stroke center qualifications. They're creating their own criteria, not using ACP standards as states are allowed to opt out on those. Statewide leveling SLRMC and St. Al's will be Level 1, maybe EIRMC. SLMVRMC is level 2. Expect some competition as to who gets credentialed. No timeline for center credentialing has been established but the goal is that every facility will be "upping their game". They will be motivated to have activation fees for Stroke & STEMI. Stroke criteria should be finalized at April 14, 2015 meeting, there will be a fee associated with designation. <u>Tom Mortimer</u> asked if trauma leveling protocols were being discussed for pre-hospital providers as it would help triage pt's to nearest appropriate facility. <u>Kevin Kraal</u> wasn't sure, would find out. He said that the state is looking for three (3) pieces of trauma data that we would like from their registry. E.g. Age, MOI, time of dispatch, scene time, pt. transferred info, time of injury to time in OR. <u>Shelly McFarland</u> states that data collection will help with protocol development and said that she is getting trained on ITR. Some points of interest would be length of stay in correlation with Injury Severity Score (ISS) and Abbreviated Injury Score (AIS). <u>Kevin Kraal</u> asked group what trauma indicators we'd like to use and stressed that it should be data we could and would actually use, he feels that high ISS is probably very important info at this point. <u>Tom Mortimer</u> felt that length of stay was important. Others were: EMS Pt contact time, EMS to definitive care, ISR to each facility, BLS to ALS contact time (rendezvous), or MOI.				Will continue to get state updates at each meeting.

Education	<p>Tom Mortimer: Education subgroup proposed the ideas for education to the communities. Will follow up with a PPT to the group before it is presented to the communities. Tom said that they've had two meetings already. Their mandate is to decrease time of symptom onset to time at definitive care facility. Brandy pointed out that education component is missing and that it's our responsibility, also that pre-hospital providers need to be empowered to make good in field decisions. Goals discussed by sub-committee were for all 3 components of TSE to use this as a system approach from EMS standpoint; from QRU's to ALS units. The 3 major points of discussion were: 1) They have chosen the <u>F.A.S.T</u> as the preferred stroke scale. 2) They're considering the catch phrase 1 out of 3 and less than 3 as a reminder for EMS to understand that if a pt has 1 symptom in the scale, they have 75% chance that it is a stroke, if they have all 3, it's an 80% chance. They also want EMS to track "Last Known Well" and if the pt has had symptoms for less than 3 hours and to understand the need to reach a stroke center and that they also have to move towards tPA, however this can happen. They also want to collect LZ's for rendezvous points and addressed the need to educate EMS to activate the system immediately. "We expect over triage" <u>Deb Robertson MD</u> wants committee to look at current data regarding 6 hours from symptom onset. 3) STEMI activation criteria to be based on assessment to activate ALS, air ambulance, and to start the flow towards cath lab immediately. Infield 12 lead capabilities discussed and as it has already been proven to be effective, grants were discussed; an AHA grant was mentioned. <u>Lara Mclean</u> said that she'd look into it as she has grant writing experience. Regarding trauma system, they recommend that we look at CDC guidelines and adopt them if state doesn't have any. The goal is to start activation process early in order to get resources moving in the right direction. They will put together packages for committee members to provide outreach education to QRU's. <u>Shelly McFarland</u> would like to see evidenced-based research to back up teaching points in outreach packages.</p>	<p>Proposed PPT to show group next meeting. Group will continue to meet until complete.</p>
Protocols		
Communication	<p>Dispatch capabilities. Will be followed up by Kathy. They have communication going to dispatch regarding EMD capabilities and have assigned different dispatch centers to members. They've also recognized a problem with radio frequencies and identified a need for lists to be supplied to air ambulances. All members are to email their frequencies to Lara for list compilation</p>	<p>Kathy will follow up with dispatch information.</p> <p>Frequencies to Lara.</p>

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Data	Shelly McFarland: Shelly states that data collection will help with protocol development and said that she is getting trained on ITR. Some points of interest would be length of stay in correlation with Injury Severity Score and Abbreviated Injury Score. The group reviewed the data from the state that Shelly had compiled showing transport times and time on scene. <u>Christian Surjan</u> (call in) said that we were to regard this info as ours and they would supply us with whatever we wanted.	
STEMI	<u>Kevin Kraal</u> STEMI report; need to identify sending and receiving STEMI facilities with our goal that pt's are transported by fastest method available to cath lab. Our opportunity is to increase 12Lead use in the field with on scene reading and transmission. <u>Christian Surgeon</u> (call in) said that SLMVRMC already has cardiac data, it should be noted that some data was collected after Cardiac Level I protocols went into effect. <u>Kevin Kraal</u> asked about sharing results of committee meeting with other committees, it was explained that all minutes are on the website at TSE.idaho.gov	
Maps	Brandy: Maps of our region were reviewed and discussed.	
Pediatrician	Kevin Kraal promised to have a pediatrician by next meeting.	Have a pediatrician named.
LZ's		
Roundtable	Lara's email...kfdmedic9@gmail.com; <u>Kevin Kraal</u> would like to select a QA subcommittee. <u>Shelly McFarland</u> wants a data person, a grant person, and would like them to look into Health and Human Services grants.	QA subcommittee & data & grant person.
Motion to end the meeting	Motion from Kathy Elwell to adjourn, Shelly McFarland seconded, and all were in favor.	
Next meeting	May 6 th 1400-1600 @ North Canyon Medical Center	Wendy will set up meeting room.

Participants	Name/Department	Present	Absent	Name/Department	Present	Absent
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	Kevin Kraal, MD/TSE Chair/SLMVRMC/ASL	x		Tami Pearson/Dept. H&W	x	
	Brandy Bartholomew/TSE Vice- chair/ASL	x		Kathy Elwell/U of U	x	
	Lara Mclean/TSE Secretary/Ketchum Fire Department	x		Stephanie Shawver/SLMVRMC	x	
	Suzanne Miller/SLWR	X		Scott Baggett/SLMVRMC	x	
	Jay Blacksher/North Canyon	x		Mark Phillips/Minidoka Memorial	x	
	Wendy Mohr/North Canyon	x		Brad Boden/Minidoka EMS	x	
	Tom Mortimer/LFN	X		Shelly McFarland/SLWR ED	x	
	Deb Robertson, MD/SLWR ED	X		Brenda Gully/MVParamedics	x	
	Blaine Patterson/MVP/ASL	X		Kent Holyoke/Life Run EMS	x	
	Dewayne Woodridge/Gooding EMS	X		Cody Langbehn/SLWR	x	
	Christian Surgeon/State TSE	X		Ann Fullmer/SLJerome	x	
	Lanny Campbell, MD/Cassia Regional	X		Maria Hoggan/Cassia Regional	x	

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Voting Member List	Agency	Name
	St Luke's Magic Valley	Kevin Kraal
	Life Flight Network	Tom Mortimer
	Air St. Luke's	Brandy Bartholomew
	St Luke's Wood River	Shelly McFarland
	Magic Valley Paramedics	Stephanie Hillius
	North Canyon Medical Center	Jay Blacksher
	Gooding EMS	Dewayne Woodridge
	Minidoka Memorial Hospital	Mark Phillips
	Minidoka EMS	Brad Boden
	Cassia Regional Medical Center	Maria Hoggan
	Ketchum Fire Department	Lara McLean
	St. Luke's Jerome	Ann Fullmer
	Lincoln County EMS	**open**
	Camas County EMS	**open**
	Wood River Fire	**open**